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PTO/SB/22 (08-03)

Approved for use through 7/31/2006. OMB 0651-0031

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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

Docket No. (Optional)

06727/000K095-US0

In re Application of Lewis Colman et al.

Application Number Filed

10/009,847-Conf. #1207 April 8, 2002

For: NEONATAL AIRWAY ADAPTOR

Art Unit

3743

Examiner

J. F. Weiss

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

One month (37 CFR 1.17(a)(1)) \$ 110.00

Two months (37 CFR 1.17(a)(2)) \$ \_\_\_\_\_

Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_

Four months (37 CFR 1.17(a)(4)) \$ \_\_\_\_\_

Five months (37 CFR 1.17(a)(5)) \$ \_\_\_\_\_

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100

I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record. Registration Number \_\_\_\_\_

attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 25,351

February 10, 2004

Date

(212) 527-7770

Telephone Number

  
Signature

S. Peter Ludwig

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

Total of 1 forms are submitted.

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110.00 OP

Express Mail Label No.

Dated: \_\_\_\_\_